



City of Long Beach
DEPARTMENT OF HUMAN RESOURCES
VOLUNTARY FURLOUGH PROGRAM
ONE DAY DONATION

EMPLOYEE REQUEST

I wish to donate one _____ (8, 9 or 10-hour) furlough day on _____ (specify day off) to restore funds to the Library.

Name (please print)

Social Security Number

Position Title

Work Phone Number

Department/Bureau/Division

I understand that I may donate one (8,9 or 10-hour) furlough day during the 2003/2004 fiscal year. The savings from this donation will go to restore funds to the Library, unless my position is grant-funded or in the Tidelands or Harbor Funds, in which event the savings will accrue to that program or fund. I also understand that loss of this pay will not impact my benefit accruals such as sick leave, vacation, and holidays and that there will be no loss of health insurance benefits. In addition, it will not affect Civil Service seniority or department seniority. While I understand I may lose one day of service time for retirement purposes if I retire within the 2003/2004 fiscal year, my compensation rate for retirement will not be negatively affected.

I also understand that I may take the furlough day off in one 8, 9 or 10-hour block or in increments of one hour or more; however, the actual date/hours that I take off must be approved by my department in the same manner as other time off.

	Program #	Grant Funded
I normally charge my time to:	_____	yes <input type="checkbox"/> no <input type="checkbox"/>
	_____	yes <input type="checkbox"/> no <input type="checkbox"/>
	_____	yes <input type="checkbox"/> no <input type="checkbox"/>

Employee Name

Date

DEPARTMENT APPROVAL

I have verified the accuracy of the data submitted above.

Supervisor

Date

Department Head

Date

HUMAN RESOURCES APPROVAL

Director of Human Resources or Designee

Date